Without the Shelter of a Home: Inclusion Health in Collaboration With Women Experiencing Homelessness

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BACKGROUND AND AIM
Homeless women in high-income countries face extreme health inequities resulting in considerably shortened lives. Homelessness continues to be considered a problem mainly affecting men, thus the vulnerability of women remains hidden. Removal of barriers to access and uptake of health care services can be accelerated by collaborating with people having experiences of social exclusion. However, women experiencing homelessness have been systematically excluded from national and international policy making forums.

The overarching goal of this project is to promote inclusion health among women in homelessness.

INCLUSION HEALTH entails:
Focusing health efforts on people in extremely poor health due to marginalization, co-morbidities, and poverty. A service, research, and policy agenda that aims to prevent and rectify health and social inequities among the most vulnerable and excluded populations in society.

Reducing homelessness globally is a focus for the United Nations Agenda for Sustainable Development 2030.

Nurses have a responsibility to advocate for social justice and promote health policies that ensure adequate care resources for the homeless (ICN).

Interactions with health care providers have been pointed out as a substantial barrier to engagement in women experiencing homelessness.

THE FIRST PART OF THE PROJECT
Explore important aspects to promote inclusion health:
• Investigate caring behaviors among nurses as perceived by women experiencing homelessness, and its associations with clinical- and demographic variables, attitudes toward homelessness, existential and general health, health literacy, and use of IT.
• Describe: a) the barriers to and facilitators of IT; and b) the attitudes towards health care engagement via IT among women experiencing homelessness.
• Investigate caring behaviors among nurses and its’ associations with attitudes to homelessness and sociodemographic variables.

Data will be collected through validated questionnaires and qualitative interviews.

Women with lived experience of homelessness will work side-by-side with researchers as members of the steering committee, with data collection, analyses, reports, and subsequently with identifying and developing a relevant intervention to promote inclusion health in line with homeless women’s needs.

Project progress:
Ethical approval granted May, 2019.
Questionnaires translated and tested. Factor analysis ongoing.
Stakeholders in healthcare and education committed.